

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>76</i>		<i>9/14/00</i>
FORMALITY REVIEW	<i>R30</i>	<i>49916</i>	<i>9/19/00</i>
RESPONSE FORMALITY REVIEW			<i>10/22/00</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	3/10/03
2	✓
3	✓
4	0
5	0
6	0
7	0
8	0
9	✓
10	0
11	0
12	0
13	0
14	0
15	0
16	0
17	0
18	0
19	0
20	✓
21	✓
22	0
23	0
24	0
25	0
26	✓
27	0
28	0
29	0
30	0
31	✓
32	0
33	0
34	0
35	0
36	✓
37	0
38	0
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
1	3/10/03
2	✓
3	✓
4	0
5	0
6	0
7	0
8	0
9	0
10	0
11	0
12	0
13	0
14	0
15	0
16	0
17	0
18	0
19	0
20	✓
21	0
22	0
23	0
24	0
25	0
26	0
27	0
28	0
29	0
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33	0
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35	0
36	0
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39	0
40	0
41	0
42	0
43	0
44	0
45	0
46	0
47	0
48	0
49	0
50	0

Claim	Date
Final Original	
101	
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If more than 150 claims or 10 actions  
staple additional sheet here